responsibilities to Part A, Office of the Secretary:

- Office on Women's Health (HAW)
- Office of Minority Health (HAM)
- President's Council on Physical Fitness and Sports (HAC)
 - Office of Research Integrity (HAG)
 Office of Research Integrity (HAG)
 - Office of Population Affairs (HA5)
- Office of International and Refugee Health (HAL)
 - Office of HIV/AIDS Policy (HAH)
- Office of Emergency Preparedness (HAP)
- Office of Disease Prevention and Health Promotion/Planning and Evaluation (HAV)
- Office of the Surgeon General (HAN)

B. Delete the remaining portion of Chapter HA, in its entirety.

IV. Amend Part A, Chapter AA, "the Office of the Secretary," Section AA.10 *Organization* by inserting the following title at the end of the section: "Office of Public Health and Science."

V. Establish a new Chapter AC, under Part A, to read as follows:

Office of Public Health and Science

AC.00 Mission

AC.10 Organization

AC.20 Functions

AC.30 Delegations of Authority

Section AC.00 Mission. The Office of Public Health and Science (OPHS) is under the direction of the Assistant Secretary for Health, who serves as the Secretary's Senior Advisor for Public Health and Science. The Office serves as the focal point for leadership and coordination across the Department in public health and science; provides direction to program offices within OPHS, and, where required by law, to other HHS components; and provides advice and counsel on public health and science issues to the Secretary.

Section AC.10 Organization. The Office of Public Health and Science (AC) is under the direction of the Assistant Secretary for Health and consists of the following components:

- A. Immediate Office (ACA)
- B. Office on Women's Health (ACB)
- C. Office of Minority Health (ACC)
- D. Office of the President's Council on Physical Fitness and Sports (ACE)
 - E. Office of Research Integrity (ACF)
 - F. Office of Population Affairs (ACG)
- G. Office of International and Refugee Health (ACH)
- H. Office of HIV/AIDS Policy (ACJ)
 I. Office of Emergency Preparedness
- J. Office of Disease Prevention and Health Promotion (ACL)
- K. Office of the Surgeon General (ACM)

Section AC.20 Functions.

A. Office of Public Health and Science (AC). The Office of Public Health and Science (OPHS), and, where required by law, other HHS components, are under the direction of the Assistant Secretary for Health (ASH) who is responsible to the Secretary for the conduct of a variety of advisory, coordinative, implementation, management, developmental, and representational activities in public health and science. The Office consists of specialized staffs that focus on cross-cutting public health and science issues of major significance to the Nation.

B. The Immediate Office (ACA). The Immediate Office: (1) Provides direction to program offices within OPHS; (2) provides advice to assure that the Department conducts broad based public health assessments designed to better define public health problems and to design solutions to those problems; assists other components within the Department in anticipating future public health issues and problems, and provides assistance to ensure that the Department designs and implements appropriate approaches, interventions, and evaluations, to maintain, sustain, and improve the health of the Nation; (3) at the direction of the Secretary, provides assistance in leading and managing the implementation and coordination of Secretarial decisions for Public Health Service Operating Divisions and, at the Secretary's direction, and for that purpose, draws on staff divisions and other organizational units for assistance in regard to legislation, budget, communications, and policy analysis; (4) provides a focus for leadership on matters including recommendations for policy on population-based public health and science and at the Secretary's direction leads and/or coordinates initiatives that cut across agencies and operating divisions; (5) provides advice to the Secretary and senior Department officials on budget and legislative issues of the Public Health Service Operating Divisions; (6) at the direction of the ASH, provides support for the Office of the Surgeon General in the exercise of statutory requirements and assigned activities, including policy setting for the Commissioned Corps; (7) works in conjunction with the Office of Intergovernmental Affairs in promoting relationships among and between State and local health departments, academic institutions, professional and constituency organizations, and the Department; (8) works in conjunction with the Assistant Secretary for Planning and Evaluation on matters of science policy analysis; (9) in

consultation with the Office of International Affairs provides advice on international and refugee health policy and coordinates international healthrelated activities and provides advice on a broad range of health activities that may be intra- and interdepartmental in scope; coordinates and manages Departmental liaison with bilateral and multilateral health agencies; (10) provides leadership for and participates in public health system improvement and development activities, particularly as they relate to population-based public health and the public health infrastructure; and (11) communicates and interacts with national professional and constituency organizations on matters of public health and science.

C. Transfer the functional statements for Items B through K, identified under Section AC.10 Organization, to the Office of Public Health and Science, intact, from Part H, Chapter HA, Statement of Organization, Functions and Delegations of Authority.

VI. Continuation of the Public Health Service: The newly established Operating Divisions and the Office of Public Health and Science shall constitute the Public Health Service.

VII. Continuation of Policy: Except as inconsistent with this reorganization, all statements of policy and interpretations with respect to the Office of the Secretary, and the Public Health Service heretofore issued and in effect prior to the date of this reorganization are continued in full force and effect.

VIII. Delegations of Authority: All delegations and redelegations of authority made to officials and employees of affected organizational components will continue in them or their successors pending further redelegation, provided they are consistent with this reorganization.

IX. Funds, Personnel and Equipment: Transfer of organizations and functions affected by this reorganization shall be accompanied in each instance by direct and support funds, positions, personnel, records, equipment, supplies and other resources.

Dated: October 31, 1995.

Donna E. Shalala,

Secretary.

[FR Doc. 95–27804 Filed 11–8–95; 8:45 am]

BILLING CODE 4160–17–M

Administration for Children and Families

Statement of Organization, Functions and Delegations of Authority

AGENCY: Administration for Children and Families, HHS.

ACTION: Correction notice.

SUMMARY: This notice amends the statement of Organization, Functions and Delegations of Authority for the Department of Health and Human Services, Administration for Children and Families, published in the Federal Register August 9, 1995 (60 FR 40586).

FOR FURTHER INFORMATION CONTACT: Howard Rolston (202) 401–9220.

SUPPLEMENTARY INFORMATION: The notice published in the Federal Register on August 9, 1995, amended Part K of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services as it applies to certain offices within the Administration for Children and Families. One of those offices is the Office of Planning, Research and Evaluation, Chapter KM.

As published, the functional statement of the Office of Planning, Research and Evaluation, Division of Child and Family Development, included extraneous and misplaced words (60 FR 40591). For clarity, the functional statement for this Division is published in its entirety below:

KM.10 Organization

The Office of Planning, Research and Evaluation is headed by a Director who reports to the Deputy Assistant Secretary for Policy and External Affairs. The Office is organized as follows:

- Office of the Director (KMA).
- Division of Economic Independence (KMB).
- Division of Child and Family Development (KMC).

KM.20 Functions

A. * * * * * B. * * * *

C. The Division of Child and Family Development

The Division of Child and Family Development, in cooperation with ACF programs and others, works with Federal counterparts, states, community agencies, and the private sector to: improve the effectiveness and efficiency of programs; assure the protection of children and other vulnerable populations; strengthen and promote family stability; and foster sound growth and development of children and their families.

The Division provides guidance, analysis, technical assistance and oversight in ACF on: Strategic planning and performance measurement for child and family development; statistical, policy and program analysis; surveys, research and evaluation methodologies; demonstration testing and model

development; synthesis and dissemination of research and demonstration findings; and application of emerging technologies to improve the effectiveness of programs and service delivery.

The Division: Manages the section 1110 social service research budget; develops policy-relevant priorities; conducts, manages and coordinates major cross-program, leading-edge research, demonstration, and evaluation studies; manages and conducts statistical, policy and program analyses on social trends and behaviors which impact child and family well-being; and works in partnership with states, local communities, and the private sector to promote the well-being of children and families.

Dated: November 3, 1995. Mary Jo Bane,

Assistant Secretary for Children and Families. [FR Doc. 95–27774 Filed 11–8–95; 8:45 am]
BILLING CODE 4184–01–M

Agency for Toxic Substances and Disease Registry

Public Meeting of the Inter-tribal Council on Hanford Health Projects (ICHHP)

The Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Public Meeting of the Inter-tribal Council on Hanford Health Projects (ICHHP), in association with the meeting of the Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites: Hanford Health Effects Subcommittee (HHES).

Time and Date: 9 a.m.-4:30 p.m., November 29, 1995.

Location: Edgewater Inn, 2411 Alaskan Way-Pier 67, Seattle, Washington 98121, telephone 206/728–7000, FAX 206/441–4119

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

Background: A Memorandum of Understanding (MOU) was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health

surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

In addition, under an MOU signed in December 1990 with DOE, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS delegated program responsibility to CDC.

Community involvement is a critical part of ATSDR's and CDC's energy-related research and activities and input from members of the ICHHP is part of these efforts. The ICHHP will work with the HHES to provide input on Native American health effects at the Hanford, Washington, site.

Purpose: The purpose of this meeting is to address issues that are unique to tribal involvement with the HHES including considerations regarding a proposed medical monitoring program and explorations of options and alternatives to providing support for tribal involvement in the HHES.

Matters to be Discussed: Agenda items will include a dialogue pertaining to issues unique to tribal involvement with HHES. This will include an update on the status of ATSDR's draft policy on establishing government-to-government relations with the nine affected tribes as sovereign nations, and exploring options and alternatives to providing support for tribal participation in HHES.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Linda A. Carnes, Health Council Advisor, ATSDR, E–28, 1600 Clifton Road, NE, Atlanta, Georgia 30333, telephone 404/639– 0730, FAX 404/639–0759.

Dated: November 3, 1995.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 95-27770 Filed 11-8-95; 8:45 am] BILLING CODE 4163-70-M

Public Health Service, Activities and Research at Department of Energy Sites, Citizens Advisory Committee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites: Hanford Health Effects Subcommittee (HHES).

Times and Dates: 9 a.m.-9 p.m., November 30, 1995. 9:15 a.m.-4 p.m., December 1, 1995.